

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	50	75316	6/27/00
O.I.P.E. CLASSIFIER	PH		6/27/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	51	51861	6/27/00

Best Available Copy

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
1	Final Original 06/27/00
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
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10	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here